

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CR-1344

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
(Column 1) (Column 2)							TYPE			OR	SMALL	
TOTAL CLAIMS			/3				RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	EE (370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ 3 minus 20=		*		X\$ 9=	=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*		X42=			OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140:			OR	+280=	
* If the difference in column 1 is less than zero, ent					"0" in c	olumn 2	TOTA			OR	TOTAL	
CLAIMS AS AMENDED - PART II										l	OTHER	THAN
	. o . augment us united principles and an institute	(Column 1)		(Colur	nn 2)	(Column 3)	SMAL	L EN	YTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	:		OR	X\$18=	
	Independent	*	Minus	***		=	X42=			OR	X84=	
	FIRST PRESE	NTATION OF MU	JLIIPLE DEF	ENDENI	CLAIM		+140=			OR	+280=	
							TOT	AL.			TOTAL	
		_					ADDIT. F	E		OR	ADDIT. FEE	
_	THE SERVICE NAME OF THE SPRINGER AND DESIGNATION OF THE P.	(Column 1) CLAIMS		(Colur HIGH		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			, OR	X\$18=	
	Independent	*	Minus	***		=	X42=			OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MU	JETIPLE DEF	ENDENT	CLAIM		+140=			OR	+280=	
								L E		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	1	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		. =	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=-	X42=	+			X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT		CLAIM		A42=	_		OR	A04=	
		and to take the con-	a and mustic south		"O" ! '	2	+140=			OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
1	The "Highest Nur	her Previously Pai	id For" (Total o	r Independ	ent) is the	highest number	found in the	appro	opriate boy	r in col	umn 1	